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## **DECLARATION** — Utility or Design Patent Application

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STATEMENT CLAIMING SM. (37 CFR 1.9(f) & 1.27(b))INI	Docket Number (Optional)					
Applicant, Patentee, or Identifier. Clifford fercell						
Application or Patent No.:						
Filed or Issued:						
Title: Fingertip	1 Grippers					
for purposes of paying reduced fee	eby state that I qualify as an independent invente es to the Patent and Trademark Office describe	or as defined in 37 CFR 1.9(c) ad in:				
	with with title as listed above.					
the application identified ab						
the patent identified above.						
I have not assigned, granted, conveyed, or licensed, and am under no obligation under contract or law to assign, grant, convey, or license, any rights in the invention to any person who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).						
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Clifford Percell NAME OF INVENTOR	NAME OF INVENTOR 1	NAME OF INVENTOR				
Signature of inventor	Signature of inventor Signature	ignature of inventor				
1-1-02 Date	Date Da	ate				

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Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:  Clifford ferceil, 713 TAMARRON PKWY, Smyrng, 6A  Fingertip Grippers (Sporting Tipe)  the specification of which  (Title of the Invention)  is attached hereto  OR  was filed on (MM/DD/YYY)  as United States Application Number or PCT International  Application Number  and was amended on (MM/DD/YYYY)  I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.  I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patient or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patient or inventor's certificate, or of any PCT international application having a filling date before that of the application on which priority is claimed.						
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO		
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hereby claim the benefit u	ation numbers are listed on a s under 35 U.S.C. 119(e) of any	supplemental priority data s	sheet PTO/SB/0	)2B attached hereto:		
hereby claim the benefit under 35 U.S.C. 119(e) of any United States promy state application(s) listed below  Application Number(s)  Filtra Date (MMCDates)						

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